

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective December 8, 2004

Application or Docket Number

10/730 780

CLAIMS AS FILED - PART I

|                                  | (Column 1)   | (Column 2)               |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     |              |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | minus 20 =   | *                        |
| INDEPENDENT CLAIMS               | minus 3 =    | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY TYPE |     | OTHER THAN OR SMALL ENTITY |     |
|-------------------|-----|----------------------------|-----|
| RATE              | Fee | RATE                       | Fee |
| BASIC FEE         |     | OR BASIC FEE               |     |
| X\$ 25=           |     | OR X\$50=                  |     |
| X100=             |     | OR X200=                   |     |
| +180=             |     | OR +360=                   |     |
| TOTAL             |     | OR TOTAL                   |     |

CLAIMS AS AMENDED - PART II

|  | (Column 1) | (Column 2)                       | (Column 3)                                       |
|--|------------|----------------------------------|--|
| AMENDMENT A                                    | 7/1/06     | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
| Total  | 8          | Minus                            | ** 20 =  |
| Independent                                    | 4          | Minus                            | *** 9 =  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                  | <input type="checkbox"/>                         |

| SMALL ENTITY     |                | OTHER THAN SMALL ENTITY |                |
|------------------|----------------|-------------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                    | ADDITIONAL FEE |
| X\$ 25=          |                | OR X\$50=               |                |
| X100=            |                | OR X200=                |                |
| +180=            |                | OR +360=                |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE     |                |

|  | (Column 1) | (Column 2)                       | (Column 3)                                       |
|--|------------|----------------------------------|--|
| AMENDMENT B                                    | 7/10/06    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA |
| Total  | Y          | Minus                            | ** 20 =  |
| Independent                                    | 4          | Minus                            | *** 9 =  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                  | <input type="checkbox"/>                         |

| RATE ADDITIONAL FEE |  | RATE ADDITIONAL FEE |  |
|---------------------|--|---------------------|--|
| X\$ 25=             |  | OR X\$50=           |  |
| X100=               |  | OR X200=            |  |
| +180=               |  | OR +360=            |  |
| TOTAL ADDIT. FEE    |  | OR TOTAL ADDIT. FEE |  |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | Minus                            | **                                 | =                        |
| Independent                                    | Minus                            | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE ADDITIONAL FEE |  | RATE ADDITIONAL FEE |  |
|---------------------|--|---------------------|--|
| X\$ 25=             |  | OR X\$50=           |  |
| X100=               |  | OR X200=            |  |
| +180=               |  | OR +360=            |  |
| TOTAL ADDIT. FEE    |  | OR TOTAL ADDIT. FEE |  |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.